

Racing Information Disseminators Monthly Report

This report is required to be filed MONTHLY, pursuant to NRS 463.450.

Account No., Name, Address, Zip Code

Please correct if in error

For Office Use Only

Check
Number

Batch
Number

Entry
Date

(A)	(B)	(C)
NAMES of Race Books supplied	TYPE of SERVICE	Fees Collected From User

PAGE TOTALS

Number of Casinos Served